

VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument
State of Alaska
Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Supervisor/Operator Performing the Verification Procedure: DataMaster cdm S/N <u>130125</u>	
Name <u>Anthony M. Wiles</u>	ID# <u>6877</u> Date <u>9-1-2010</u>
Agency <u>AST</u>	Phone # <u>451-5100</u>
Instrument Location <u>1979 Peger Rd. FBKS, AK 99701</u>	
<div style="display: flex; justify-content: space-between;"> Alco S/N <u>77198</u> Target Value <u>.082</u> High Pressure <u>1300 PSI</u> </div>	
<div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> Alco Test Values <u>.077</u> 1st Alco </div> <div style="text-align: center;"> <u>.077</u> 2nd Alco </div> </div>	
Signature <u>Anthony Wiles</u>	

(OVER)

(Do Not write in the area below)

I, Nita J. Bolz, after being first duly sworn, depose and state as follows:

- (1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.
- (2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.
- (3) I am the Scientific Director of the State Breath Alcohol Program.
- (4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.
- (5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.
- (6) The referenced instrument is certified for evidentiary use in the State of Alaska.

Nita J. Bolz
 Nita J. Bolz
 Scientific Director
 State Breath Alcohol Program

Subscribed and sworn before me this 16th day of Sept, 2010.

Carolyn M. Noland
 Carolyn M. Noland
 Notary Public, State of Alaska
 Commission Expires with Office

(Notary Seal Stamp)



VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N 130125

(CONTINUED FROM FRONT PAGE)

C TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

NONDRINKING SUBJECT TEST

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130125

SEPTEMBER 01, 2010

OPERATOR'S NAME:

WILES/ANTHONY/MICHAEL

OPERATOR'S NUMBER: 6977

SUBJECT'S LAST NAME:

VERIFICATION OF CAL

SUBJECT'S FIRST NAME: NI :

N

O.L. #: N

DEPT/AGENCY: FBX0

DATE/REPORT: N

TEST TYPE: U

ALCO TARGET VALUE: .002

ALCO S/N: 77198

--- BREATH ANALYSIS ---

.002 ADJUSTED FOR 29.54 in
ALCO TARGET .000 12:41
BLANK TEST .000 12:42
INTERNAL STANDARD VERIFIED 12:42
ALCO TV 29.54 in .077 12:43
BLANK TEST .000 12:43
SUBJECT SAMPLE .000 12:44
BLANK TEST .000 12:45
ALCO TV 29.54 in .077 12:45
BLANK TEST .000 12:46

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130125

SEPTEMBER 01, 2010

TIME 12:47

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM: OKAY

SOFTWARE DATE: 02/20/01

HEATERS

SAMPLE CHAMBER: 49c

BREATH TUBE: 43c

BAROMETER: 29.54 in

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

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HIJKLMNOPQRSTUVWXYZ[\] ^ _ ` abcdefghijklmno
pqrstuvwxyz{|}~